

'A.		PART E	3 - FEE(S)	TRAN	SMITTAL			
Complete and send t	this form, together wi	th applicable f	ee(s), to: M or F	]	Mail Stop ISSU Commissioner f P.O. Box 1450 Alexandria, Vir 703) 746-4000			
	orm should be used for trainerespondence including the below or directed otherwise	Potent advance or	rders and nobit	icalion o	i maintenance tees	will be malled to the clime	nt corresponde	nce ada
	CE ADDRESS (Note: Use Black I for	r any change of address)		F	ce(s) Transmittal. T	f mailing can only be used his certificate cannot be use tal paper, such as an assign	d for any other	accomp
	12/16/2004			K	ave its own certifica	te of mailing or transmission	n.	CIAMI
RANDALL J. KNUTH P.C. 4921 DESOTO DRIVE FORT WAYNE, IN 46815				l S a·	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with th States Postal Service with sulficient postage for first class mail in an addressed to the Mail Stop ISSUE FEE address above, or being transmitted to the USPTO (703) 746-4000, on the date indicated below			
					Randath	I. Knuth		Bapan
				-	March 11	, 2005	Hu	(IS
APPLICATION NO.	FILING DATE	1	FIRST NAMED	INVENTO	OR .	ATTORNEY DOCKET NO.	CONFIRM	ATION
09/521,037	03/08/2000	·	Pawan R.	Gupta		MOF-11	19	18
nonprovisional	YES	\$700			50	\$700	03/16	/2005
						3700	03/10	12003
				OL 4	CC CLIDCI ACC			
	LILYBETT	2855			SS-SUBCLASS 373-862391	J		
MARTIR, I		2855		(		ist Bon	doll I V	
MARTIR, I I. Change of correspondence CFR 1.363).	LILYBETT e address or indication of "F	2855 ee Address" (37	2. For printi	ng on the	273-862391 e patent front page, l to 3 registered pate	, Ran	dall J. K	nu
MARTIR, I  Change of correspondence CFR 1. J63).  Change of correspond Address from PTO/SB/12  Fee Address" indicat. PTO/SB/47; Rev 03-02 o	LILYBETT	2855 ee Address" (37 Correspondence	2. For printi (1) the namor agents Of (2) the namor egistered at 2 registered	ng on the es of up R, alterna e of a sin ttorney o patent at	or 273-862391  The patent front page, is to 3 registered pate atively, agle firm (having as or agent) and the nanttorneys or agents. If	nt attorneys 1 Kan n member a 2 2	dall J. K	nu
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	LILYBETT  e address or indication of "F  dence address (or Change of 22) attached.  tion (or "Fee Address" Indication	2855 ce Address" (37 Correspondence ation form e of a Customer	2. For printi (1) the nam or agents Of (2) the nam registered at 2 registered listed, no na	ng on the es of up R, alterna e of a sin ttorney o patent at me will t	ora-862391  to 3 registered pate stively,  ngle firm (having as or agent) and the nan tomeys or agents. If the printed.	nt attorneys 1 Kan n member a 2 2	dall J. K	(nu
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/I2  "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  AASSIGNEE NAME AND PLEASE NOTE: Unless	LILYBETT  e address or indication of "F  dence address (or Change of 22) attached.  iton (or "Fee Address" Indico or more recent) attached. Use  PRESIDENCE DATA TO B  it an assignce is identified by	2855 ce Address" (37 Correspondence ation form e of a Customer EPRINTED ON T	2. For printi (1) the namor agents OI (2) the name registered at 2 registered listed, no na THE PATENT (data will appea	ng on the es of up R, alterna e of a sin ttorney o patent at me will it	ora-862391  e patent front page, l  to 3 registered pate atively,  gle firm (having as  or agent) and the nan atomeys or agents. If  be printed.  type)  patent. If an assign	nt attorneys 1 Ran a member a 2 ness of up to no name is 3		
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/I2  "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  AASSIGNEE NAME AND PLEASE NOTE: Unless	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Us  D RESIDENCE DATA TO E an assignee is identified be 37 CFR 3.11. Completion	2855 ce Address" (37 Correspondence ation form e of a Customer SE PRINTED ON T clow, no assignee cof this form is NOT	2. For printi (1) the nam or agents Of (2) the nam registered at 2 registered listed, no na THE PATENT ( data will appea r a substitute fo	ng on the es of up R, alterna e of a sin ntomey o patent at me will i (print or or on the	ora-862391  e patent front page, l  to 3 registered pate atively,  gle firm (having as  or agent) and the nan atomeys or agents. If  be printed.  type)  patent. If an assign	nt attorneys  1 Ran  a member a  2  nes of up to  no name is  3  nee is identified below, the		
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/n2  "Fee Address" indicat PTO/SB/n47; Rev 03-02 o Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Us  D RESIDENCE DATA TO E an assignee is identified be 37 CFR 3.11. Completion	2855 ce Address" (37 Correspondence ation form e of a Customer SE PRINTED ON T clow, no assignee cof this form is NOT	2. For printi (1) the nam or agents Of (2) the nam registered at 2 registered listed, no na THE PATENT ( data will appea r a substitute fo	ng on the es of up R, alterna e of a sin ntomey o patent at me will i (print or or on the	pracent front page, 1 to 3 registered pate atively, ingle firm (having as or agent) and the nantomeys or agents. If the printed.  type)  patent. If an assign aussignment.	nt attorneys  1 Ran  a member a  2  nes of up to  no name is  3  nee is identified below, the		
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Usi  D RESIDENCE DATA TO B attached at a massignee is identified be 37 CFR 3.11. Completion  EE	2855 ee Address" (37 Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT  (B	2. For printi (1) the nam or agents Oil (2) the nam registered at 2 registered di listed, no na HE PATENT ( data will appear a substitute for	ng on the es of up R, alternate of a sinttorney opatent at me will it (print or or on the or filing a c: (CITY	pracent front page, it to 3 registered pate atively, agle firm (having as or agent) and the nantomeys or agents. If the printed.  Type)  patent. If an assign and STATE OR CO	n member a 2nes of up to no name is 3nee is identified below, the	document has	been
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/II  "Fee Address" indicat PTO/SB/II; Rev 03-02 o Number is required.  A ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Usi  D RESIDENCE DATA TO B attached at a massignee is identified be 37 CFR 3.11. Completion  EE	2855 ee Address" (37 Correspondence ation form e of a Customer BE PRINTED ON T elow, no assignee of this form is NOT  (B	2. For printi (1) the nam or agents Ol (2) the nam registered at 2 registered listed, no na HE PATENT ( data will appear a substitute fo ) RESIDENCE	ng on the es of up R, alterna e of a sin thomey o patent at me will to print or on the or filing a c: (CITY ent):	pracent front page, it to 3 registered pate natively, gigle firm (having as or agent) and the nantomeys or agents. If the printed.  Type)  and STATE OR CO	n member a 2 nes of up to no name is 3  mee is identified below, the UNTRY)	document has	been
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE  Please check the appropriate The following fee(s) are the control of the	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use  PRESIDENCE DATA TO Be an assignee is identified be 37 CFR 3.11. Completion  EE  e assignee category or category category and category or category and category or category and category or category and	2855 ee Address" (37 Correspondence ation form e of a Customer UE PRINTED ON T elow, no assignee of this form is NOT  (B	2. For printi (1) the nam or agents Ol (2) the nam registered at 2 registered listed, no na HE PATENT ( data will appear a substitute for ) RESIDENCE	ng on the es of up R, alterna e of a sint ntorney o patent at me will i  (print or or on the or filing a  :: (CITY  cent): the amo y credit of	pracent front page, it to 3 registered pate attively, registered pate attively, gigle firm (having as ar agent) and the nantomeys or agents. If the printed.  Type  Individual Count of the fee(s) is ereard. Form PTO-203:	an member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	group entity K	l Gove
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/II  "Fee Address" indicat PTO/SB/II  "Fee Address" indicat PTO/SB/II  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE  Please check the appropriate Tallsue Fee	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use  PRESIDENCE DATA TO Be an assignee is identified be 37 CFR 3.11. Completion  EE  e assignee category or category category and category or category and category or category and category or category and	2855 ee Address" (37 Correspondence ation form e of a Customer UE PRINTED ON T elow, no assignee of this form is NOT  (B	2. For printi (1) the nam or agents Ol (2) the nam registered at 2 registered listed, no na HE PATENT ( data will appear a substitute for ) RESIDENCE	ng on the es of up R, alterna e of a sint ntorney o patent at me will i  (print or or on the or filing a  :: (CITY  cent): the amo y credit of	pracent front page, it to 3 registered pate attively, registered pate attively, gigle firm (having as ar agent) and the nantomeys or agents. If the printed.  Type  Individual Count of the fee(s) is ereard. Form PTO-203:	nn attorneys  n member a ness of up to no name is nee is identified below, the UNTRY)  Corporation or other private neclosed.	group entity K	been Gove
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE  Please check the appropriate  The following fee(s) are  Struck fee  Advance Order - # of  Change In Entity Status	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indica or more recent) attached. Usi  D RESIDENCE DATA TO B is an assignee is identified bit 37 CFR 3.11. Completion  EE  e assignee category or catego enclosed:  mall entity discount permitted f Copies	2855 ce Address" (37 Correspondence ation form e of a Customer BE PRINTED ON T ellow, no assignce of this form is NOI  (B arries (will not be pri 4b	2. For printi (1) the name or agents Of (2) the name registered at 2 registered listed, no na THE PATENT (data will appear a substitute for ) RESIDENCE inted on the pat Payment of Fix A check in Payment by The Direct Deposit Account	ng on the es of up R, alterna e of a sin nttorney o patent at me will i (print or or on the or filing a :: (CITY  ent):  ec(s): the amo y credit c tor is he ant Numb	e patent front page, it to 3 registered pate atively, ingle firm (having as or agent) and the nantomeys or agents. If the printed.  Type)  patent. If an assignment.  and STATE OR CO  Individual Count of the fec(s) is ereard. Form PTO-203; reby authorized by coer	an entitle a 2 ness of up to 6 no name is 3 nee is identified below, the 1 UNTRY) Corporation or other private 1 Check Charge the required fee(s), charge the required fee(s), cenclose an extra	group entity KNO 83	l Gove 04
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/II  "Fee Address" indicat PTO/SB/II; Rev 03-02 o Number is required.  A ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE  Please check the appropriate  The following fee(s) are  State of the company of the co	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indico or more recent) attached. Us  PRESIDENCE DATA TO B is an assignee is identified bit 37 CFR 3.11. Completion  EE  e assignee category or catego enclosed:  mail entity discount permitte f Copies	2855 ee Address" (37 Correspondence ation form e of a Customer  EE PRINTED ON T elow, no assignce of this form is NOT  (B  arries (will not be pri 4b  ad)  37 CFR 1.27.	2. For printi (1) the name or agents Ol (2) the name registered at 2 registered listed, no na THE PATENT (data will appear a substitute for ) RESIDENCE inted on the patent of Fix A check in Payment of Fix A check in Payment by The Direct Deposit Account b. Applicar	ng on the es of up R, alterna e of a sin nttorney o patent at more will i (print or or or on the or filing a :: (CITY  ent): the amo y credit of tor is her out is no lot	programment of the feet's patential of the feet's pate	an member a 2 ness of up to 7 no name is 3 nee is identified below, the 10 norporation or other private 10 neclosed. So is attached. Sharge the required fee(s), (enclose an extra	group entity CK No 83	Gove
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/II  "Fee Address" indicat PTO/SB/II; Rev 03-02 o Number is required.  A ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE  Please check the appropriate  The following fee(s) are  State of the company of the co	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indica or more recent) attached. Usi  D RESIDENCE DATA TO B is an assignee is identified bit 37 CFR 3.11. Completion  EE  e assignee category or catego enclosed:  mall entity discount permitted f Copies	2855 ee Address" (37 Correspondence ation form e of a Customer  EE PRINTED ON T elow, no assignce of this form is NOT  (B  arries (will not be pri 4b  ad)  37 CFR 1.27.	2. For printi (1) the name or agents Ol (2) the name registered at 2 registered listed, no na THE PATENT (data will appear a substitute for ) RESIDENCE inted on the patent of Fix A check in Payment of Fix A check in Payment by The Direct Deposit Account b. Applicar	ng on the es of up R, alterna e of a sin nttorney o patent at more will i (print or or or on the or filing a :: (CITY  ent): the amo y credit of tor is her out is no lot	programment of the feet's patential of the feet's pate	an member a 2 ness of up to 7 no name is 3 nee is identified below, the 10 norporation or other private 10 neclosed. So is attached. Sharge the required fee(s), (enclose an extra	group entity CK No 83	Gove
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/II  "Fee Address" indicat PTO/SB/II; Rev 03-02 o Number is required.  A ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNE  Please check the appropriate  The following fee(s) are  State of the company of the co	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indico or more recent) attached. Us  PRESIDENCE DATA TO B is an assignee is identified bit 37 CFR 3.11. Completion  EE  e assignee category or catego enclosed:  mail entity discount permitte f Copies	2855 ee Address" (37 Correspondence ation form e of a Customer  EE PRINTED ON T elow, no assignce of this form is NOT  (B  arries (will not be pri 4b  ad)  37 CFR 1.27.	2. For printi (1) the name or agents Ol (2) the name registered at 2 registered listed, no na THE PATENT (data will appear a substitute for ) RESIDENCE inted on the patent of Fix A check in Payment of Fix A check in Payment by The Direct Deposit Account b. Applicar	ng on the es of up R, alterna e of a sin nttorney o patent at more will i (print or or or on the or filing a :: (CITY  ent): the amo y credit of tor is her out is no let	e patent front page, it to 3 registered pate atively, ingle firm (having as or agent) and the nantomeys or agents. If the printed.  Type)  Individual Count of the fee(s) is ereard. Form PTO-203: reby authorized by compared the printed of the fee(s) and state of the fee(s) is ereard. Form PTO-203: reby authorized by compared aliming SMA-apply any previous in the applicant; a regiment.	an member a 2 ness of up to 7 no name is 3 nee is identified below, the 10 norporation or other private 10 neclosed. So is attached. Sharge the required fee(s), (enclose an extra	group entity K No 83 or credit any over copy of this for CFR 1.27(g)(2) ccation identifies the assignee or	Gove
MARTIR, I  Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  A ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNI  Please check the appropriate The following fee(s) are of the Use of the Use of the Color of the Use of the Color of the Use of the Color of the Use of the Us	LILYBETT  e address or indication of "F dence address (or Change of 22) attached.  tion (or "Fee Address" Indico or more recent) attached. Us  PRESIDENCE DATA TO B is an assignee is identified bit 37 CFR 3.11. Completion  EE  e assignee category or catego enclosed:  mail entity discount permitte f Copies	2855 ce Address" (37 Correspondence ation form e of a Customer IE PRINTED ON T elow, no assignee of this form is NOT  (B anies (will not be pri 4b and)  27 CFR 1.27. are Fee and Publicat will got be accepted and Trademark	2. For printi (1) the name or agents Ol (2) the name registered at 2 registered listed, no na THE PATENT (data will appear a substitute for ) RESIDENCE inted on the patent of Fix A check in Payment of Fix A check in Payment by The Direct Deposit Account b. Applicar	ng on the es of up R, alterna e of a sin nttorney o patent at more will i (print or or or on the or filing a :: (CITY  ent): the amo y credit of tor is her out is no let	pracent front page, it to 3 registered pate natively, registered pate natively, registered pate natively, registering and the nantomeys or agents. If the printed.  Type)  Individual Count of the fee(s) is ereard. Form PTO-203 reby authorized by coer.	an entropeys 1 Ran a member a 2 nes of up to no name is 3 nee is identified below, the tuntry)  torporation or other private checlosed. So is attached. Checlosed. Sharge the required fee(s), (enclose an extra tuntry traitus. See 37 by paid issue fee to the applipatered attorney or agent; or	group entity K No 83 or credit any over copy of this for CFR 1.27(g)(2) ccation identifies the assignee or	Gove 04

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

03/16/2005 ZJUHAR2 00000028 09521037

700.00 OP

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re of Applicant Pawan R. Gupta Serial No.: 09/521,073 Filing Date: March 8, 2000 Title: DEVICE AND METHOD FOR TESTING THE TENSION IN STRESSED CABLES OF CONCRETE **STRUCTURE** 

Art Group: 2855

Examiner: Martir, Lilybett Docket No.: MOF-11 Confirmation No.: 1918

Allowed: December 16, 2004 ATTN: Office of Publications

## SUBMISSION OF ISSUE FEE TRANSMITTAL LETTER

Mail Stop ISSUE FEE Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed herewith please find an Issue Fee Transmittal including a check in the amount of Seven

Hundred Dollars (\$700), which covers the Issue Fee for the above-identified application.

Respectfully submitted,

Randall J. Knuth

Registration No. 34,644

RJK/jrw RANDALL J. KNUTH, P.C. 4921 DeSoto Drive Fort Wayne, IN 46815 Telephone: 260-484-4526

Facsimile: 260-484-0185 Encs: PTOL-85B

Check No. 8304 (\$700)

Return Postcard

**CERTIFICATE OF MAILING** 

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA

22313-1450, on: March 11, 2009.

Randall J. Knuth, Registration No. 34,644

March 11, 2005

Date